

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/815825

FILING DATE

3/22/01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		1				
3						
4						
5						
6		1				
7		1				
8						
9		1				
10		1				
11						
12						
13						
14						
15						
16						
17			2			
18		1				
19		1				
20		1				
21		1				
22		1				
23		1				
24		1				
25		1				
26			2			
27			2			
28			1			
29		1				
30		1				
31		1				
32		1				
33			1			
34		1				
35			1			
36		1				
37			1			
38		1				
39			1			
40			1			
41			1			
42			1			
43		1				
44		1				
45			1			
46			1			
47			1			
48		1				
49						
50						
TOTAL IND.	20					
TOTAL DEP.	29					
TOTAL CLAIMS	49					

51						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.
	1	/					51			
2		/					52			
3	/						53			
4	/						54			
5	/						55			
6		/					56			
7		/					57			
8	/						58			
9		/					59			
10		/					60			
11	/						61			
12	/						62			
13	/						63			
14	/						64			
15		1					65			
16							66			
17	/	4					67			
18		1					68			
19		1					69			
20		1					70			
21		1					71			
22		1					72			
23		1					73			
24		1					74			
25		1					75			
26	/	2					76			
27	/	2					77			
28	/						78			
29		1					79			
30		1					80			
31		1					81			
32		1					82			
33	/						83			
34		1					84			
35	/						85			
36		1					86			
37	/						87			
38		1					88			
39	/						89			
40		1					90			
41		5					91			
42	/						92			
43		1					93			
44		1					94			
45	/						95			
46	/						96			
47	/						97			
48	/	3					98			
49							99			
50							100			
TOTAL IND.	20						TOTAL IND.			
TOTAL DEP.	38						TOTAL DEP.			
TOTAL CLAIMS	58						TOTAL CLAIMS			

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS